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The Commonwealth of Massachusetts

Executive Office of Health and Human Services
Department of Public Health
Division of Health Professions Licensure

Board of Registration in Pharmacy 239 Causeway Street, Suite 200, 2nd Floor Boston, MA 02114 (800) 414-0168 (office) / 617-973-0983 (fax) http://www.mass.gov/reg/boards/ph

BOARD OF PHARMACY REGULATIONS AT 247 CMR (6.09) (6.10)

DISCONTINUANCE OF A COMMUNITY PHARMACY OR PHARMACY DEPARTMENT

- 1. Any person who wishes to close a pharmacy or pharmacy department registered by the Board shall notify the Board in writing or by certified mail at least 14 days in advance of the intended closing, unless otherwise informed by the Board, and shall provide the following information.
 - (a) the name, address and telephone number of the pharmacy or pharmacy department;
 - (b) the pharmacy permit number;
 - (c) the pharmacy controlled substances registration number issued by the Board;
 - (d) the pharmacy certificate of fitness number issued by the Board, if applicable;
 - (e) the name of the pharmacist Manager of Record of the pharmacy or pharmacy department
 - (f) the date on which the intended closure shall take place;
 - (g) the intended procedures for closing the pharmacy or pharmacy department;
 - (h) verification that adequate advance notice of the closure has been given to customers of the pharmacy or pharmacy department; and
 - (i) the intended procedures for disposal of controlled substances, or the intended procedures for transfer of controlled substances in accordance with 247 CMR 6.10.
- 2. Within ten days of the closure of a pharmacy or pharmacy department, the following shall be completed by the pharmacist Manager of Record:
 - (a) the pharmacy permit shall be returned to the Board;
 - (b) the pharmacy controlled substances registration shall be returned to the Board;
 - (c) the pharmacy certificate of fitness, if issued, shall be returned to the Board; and
 - (d) the Board shall be notified that all controlled substances have been disposed of in accordance with federal regulations at 21 CFR 1307.21.
- 3. Please remember to notify other appropriate agencies regarding your closing, including the Division of Medical Assistance (DMA).

6.10 DISTRIBUTION OF CONTROLLED SUBSTANCES UPON DISCONTINUANCE OR TRANSFER OF BUSINESS OF A PHARMACY OR PHARMACY DEPARTMENT

- 1. Any person who intends to transfer controlled substances in Schedules II through VI from one pharmacy or pharmacy department to another pharmacy or pharmacy department within the Commonwealth shall officially notify the Board in writing, by certified mail at least 14 days before the intended transfer, unless otherwise authorized by the Board, and shall provide the Board with the following information:
 - (a) the name, address and telephone number of the transferor pharmacy or pharmacy department;
 - (b) the name, address and telephone number of the transferee pharmacy or pharmacy department
 - (c) the pharmacy permit number of the transferor pharmacy or pharmacy department
 - (d) the pharmacy permit number of the transferee pharmacy or pharmacy department;
 - (e) the pharmacy controlled substances registration number of the transferor pharmacy or pharmacy department;
 - (f) the pharmacy controlled substances registration number of the transferee pharmacy;
 - (g) the name and pharmacist registration number of the Manager of Record of the transferor pharmacy or pharmacy department;
 - (h) the name and pharmacist registration number of the Manager of Record of the transferee pharmacy or pharmacy department;
 - (i) the date on which the transfer of the controlled substances will take place; and
 - (j) the intended security procedures for transfer of controlled substances.
- 2. After proper notification, the transfer of controlled substances may occur provided the following procedures are adhered to:
 - (a) on the date of the transfer, a complete inventory of all controlled substances in Schedules II through V shall be taken in accordance with federal and state law;
 - (b) said inventory shall be signed by the pharmacist Manager of Record of the transferor pharmacy or pharmacy department and the pharmacist Manager of Record of the transferee pharmacy or pharmacy department;
 - (c) both the transferor and transferee pharmacy or pharmacy department shall maintain a copy of the inventory for two years or as otherwise required by law;
 - (d) a copy of said inventory shall be filed with the Board within 10 days of the transfer;
 - (e) the transferee pharmacy or pharmacy department shall receive all required controlled substances and controlled substances inventory records on the date of the transfer and maintain those records for two years; and
 - (f) the transferor pharmacy or pharmacy department shall not possess any controlled substances after the date of transfer.

If additional information is necessary, please contact the Board office at (800) 414-0168.

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 - (c) the pharmacy permit number of the transferor pharmacy or pharmacy department
 - (d) the pharmacy permit number of the transferee pharmacy or pharmacy department;
 - (e) the pharmacy controlled substances registration number of the transferor pharmacy or pharmacy department;
 - (f) the pharmacy controlled substances registration number of the transferee pharmacy;
 - (g) the name and pharmacist registration number of the Manager of Record of the transferor pharmacy or pharmacy department;
 - (h) the name and pharmacist registration number of the Manager of Record of the transferee pharmacy or pharmacy department;
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If additional information is necessary, please contact the Board office at (617) 727-9953.